



Little Traverse Bay Bands of Odawa Indians Elders Association Scholarship

Scholarship Application

Aanii Student,

The following items detail the requirements and guidelines for applying for the LTBB Elders Association scholarship.

Administration

General administration of the LTBB Elders Association Scholarship is under the direction of the LTBB Elder Association. The Association will screen all applications and then conduct a random lottery to select the two recipients. Scholarship recipients will be notified following the first Thursday of September each year.

All applications must be sent to the LTBB Education Department. The address is:

LTBB Education Department

7500 Odawa Circle

Harbor Springs, MI. 49740

Applications will be forwarded to the LTBB Elders Association on August 2nd. **ALL applications received after August 1st will be returned.**

Awards/Allocation

The *standard* LTBB scholarship award for each student will be a one time payment made directly to the student of \$500.

Qualifications

1. Applicant must be an enrolled member of the Little Traverse Bay Bands of Odawa Indians.
2. Applicant must be a high school senior or returning college student enrolled as a full-time student.
3. High School students: Applicant must have a high school grade point average (g.p.a.) of 3.0 or higher. Applicant must attach to this application form the current official high school transcripts.
Current college students: Applicant must have a cumulative g.p.a. of 3.0 or higher. Applicant must attach to this application form the current official college transcripts.
Contact schools early in order to receive your transcripts in time to mail with this application. High school transcripts are not necessary if you have completed at least one semester of college and are presently attending college.
4. Completed application with all required attachments must be in to the LTBB Education Department office by August 1st prior to the fall semester of intended enrollment.

Scholarship Application Form

Information must be typed or written legibly.

Deadline – Completed Application with all attachments must be received in the LTBB Education Department Office by August 1st

Important: Be sure to enclose transcripts. Mail to LTBB Education Department, 7500 Odawa Circle, Harbor Springs, MI. 49740

Name _____

D.O.B. ____ / ____ / ____ Social Security # ____ - ____ - ____ Tribal ID# _____

PERMANENT ADDRESS:

Street _____

City, State, Zip _____

Phone Number _____

☐

Check if same as above

SCHOOL ADDRESS: (Where you live while attending school)

Street _____

City, State, Zip _____

Phone Number _____

E-Mail Address _____

NAME OF HIGH SCHOOL ATTENDED: _____

Date of Graduation: _____

COLLEGE/UNIVERSITY:

Public ____ Private ____ Tribal ____

Name _____

Street _____

City, State, Zip _____

I WILL BE A:

Freshman ☐ Sophomore ☐ Junior ☐ Senior ☐ Graduate ☐

I declare that the information given by me on this form is true, correct, and complete to the best of my knowledge, and that if granted assistance I will use it only for educational expenses.

Signature of student _____ Date _____